Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84215.5)	<b>GOP</b>	FI		COVER PAGE LIFORNIA 460 1901/02 FORM
SEE INSTRUCTIONS ON REVERSE	Statement covers period from 01/18/2004 through 02/14/2004	REGISTRA	AR OF YOTERS  MCL Deputy	1
State Candidate Election Committee  Recall  (Also Complete, Part 5)  General Purpose Committee  Sponsored Small Contributor Committee  Propositical Party/Central Committee	allot Measure Committee ) Primarily Formed ) Controlled ) Sponsored so Complete Part 6; rimarily Formed Candidate/ fficeholder Committee so Complete Part 7)	2. Type of Statement:    X   Preelection Statement     Semi-annual Statement     Termination Statement     Amendment (Explain below)	☐ Quarterly Sk ☐ Special Odd ☐ Supplements Statement	-Year Report
3. Committee Information  COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)  Friends Of Lou Correa  STREET ADDRESS (NO PO. BOX)	NUMBER 1243923	Treasurer(s)  NAME OF TREASURER  Kinde Durkee  MAILING ADDRESS  CITY	STATE ZIP CODE	AREA CODE/PHONE
CITY STATE ZIP COD  MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BO  CITY STATE ZIP COD  OPTIONAL: FAX / E-MAIL ADDRESS	DX.	MAILING ADDRESS  CITY  OPTIONAL: FAX / E-MAIL ADDRESS	STATE ZIP CODE	AREA CODE/PHONE
4. Verification I have used all reasonable diligence in preparing and reviewin certify under penalty of perjury under the laws of the State of  Executed on	By Lou Correa  Signature of Control  By	Significan of Treasurer or Assistant Frosurer	Consible Officer of Sponsor	s is true and complete. I
Executed on	Rv	gnature of Controlling Officeholder, Candidate, State Measure Propagation of Controlling Officeholder, Controlling Officeholder, Controlling	oponeni .	

Officeholder or Candidate Controlled Commi	ittee	6.	Ballot Measure Commit	tee		
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE			
Lou Correa						
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRIC	T NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTI	ON	
Board Of Supervisors, Orange County, Dis	strict: 01					SUPPORT OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CI	TY STATE ZIP			<u> </u>		
			Identify the controlling offic	eholder, ça	ndidate, or state measu	re proponent, if an
			NAME OF OFFICEHOLDER, CAND			
Related Committees Not Included in this Stat	ement: List any committees		•			
not included in this statement that are controlled by you o contributions or make expenditures on behalf of your cand	f are primarily formed to making		OFFICE SOUGHT OR HELD	-	DISTRICT	O. IF ANY
COMMITTEE NAME	A.D. NUMBER					·
Assemblymember Correa Campaign Legal	1259421					
NAME OF TREASURER	CONTROLLED COMMITTEE?	7.	Primarily Formed Comm	nittee <i>List</i>	names of officeholder(s) o	r candidate(s) for
Kinde Durkee	∑ YES □ NO	-	which this committee is primar	lly formed.	.,	
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BD.	XI		NAME OF OFFICEHOLDER OR CA	NDIDATE	OFFICE SOUGHT OR HEL	SUPPORT
CITY						DPPOSE
STATE ZIP CO	DE AREA CODE/PHONE		NAME OF OFFICEHOLDER OR CA	NDIDATE	OFFICE SOUGHT OR HELI	
COMMITTEE NAME			•			SUPPORT OPPOSE
Commit ( CE 1934)E	I.D. NUMBER		NAME OF OFFICEHOLDER OR CA	NDIDATE	OFFICE COLLOWER OF HE	
			The second secon	MOIDAIE	OFFICE SOUGHT OR HELI	SUPPORT
NAME OF TREASURER	CONTROLLED COMMITTEE?				·	OPPOSE
	YES NO		NAME OF OFFICEHOLDER OR CA	NDIDATE	OFFICE SOUGHT OR HELE	SUPPORT
COMMITTEE ADDRESS STREET ADDRESS (NO RO. BOX	<)					☐ OPPOSE
CITY STATE 3/2 CO			,			
CITY STATE ZIP CO	DE AREA CODE/PHONE		Attach	continuatio	on sheets if necessary	

## Campaign Disclosure Statement Summary Page

Type or print in ink, Amounts may be rounded to whole dollars.

Statement covers period from 01/18/2004 CALIFORNIA 460

through 02/14/2004 Page 3 of 15

I.D. NUMBER
1243923

SEE INSTRUCTIONS ON REVERSE NAME OF FILER					through	02/14/2004	Page 3	of15
Friends Of Lou Correa							1.D. NUMBE 1243923	
Contributions Received		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	•	COLUMN CALENDARY TOTALT ODA	EAR	Calendar Year Sum Running in Both th	mary for 0	Candidates
1. Monetary Contributions	\$	2,770.00	\$	4,97	70.00	General Elections		
2. Loans Received		0.00			0.00	1/1 (	rough 6/30	7/1 to Date
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$	2,770.00	\$		70.00	20. Contributions 8 0.0	D <b>O</b>	. 0.00
4. Nonmonetary Contributions		450.00			0.00	21 Everysteine		¥
5. TOTAL CONTRIBUTIONS RECEIVED	\$	3,220.00	\$	5,42	20.00	Made \$ 0.0	00	\$ 0.00
Expenditures Made	-					Expenditure Limit S		01-4-
6. Payments Made	\$	64,853,25	\$	65,6°	19.25	Candidates	ummary r	or State
7. Loans Made		0.00			0.00			
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$	64,853.25	\$	65,6	19.25	22. Cumulativ (N Subject to	e Expenditu Voluntary Expen	res Made" liture Limit)
9. Accrued Expenses (Unpaid Bills)		0.00			0.00	Date of Election		Total to Date
10. Nonmonetary Adjustment		450.00			50.00	(mm/dd/yy)	•	
11. TOTAL EXPENDITURES MADE	\$	65,303.25	\$	66,06	<u> </u>	J	_ \$_	
Current Cash Statement							\$	
12. Beginning Cash Balance Previous Summary Page, Line 16	\$	459,738.85	To	calculate Colum	in R add		- +	
13. Cash Receipts		2,770.00	am	ounts in Column	A to the		- \$_	
14. Miscellaneous Increases to Cash		0.00	fro	responding ami n Column B of :	your last		_ S_	
15. Cash Payments		64,853.25	rep Coi	ort. Some amo umn A may be	unts in negative			
16. ENDING CASH BALANCE	\$	397,655.60	figu	res that should tracted from pr	be		_ \$_	
If this is a termination statement, Line 16 must be zero.			per	od amounts. If	this is		- \$_	
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$	0.00	for	first report beir fils calendar ye	ear, only	*Cinco lanuaria paga		
Cash Equivalents and Outstanding Debts			fror	y over the amon Lines 2, 7, an	ounts Id 9 (if	*Since January 1, 2001. A different from amounts rep	ented in Colu	s section may be not be
18. Cash Equivalents	\$	0.00	any		•			
19. Outstanding Debts Add Line 2 + Line 9 in Column B above		0.00				·	EDDC "	
	•					FPPC Tol	ree Heipili ااl-Free Heipili	orm 460 (June/01 ie: 866/ASK-FPP

Schedule A Monetary Contributions Received

Type or print in ink.

Amounts may be rounded to whole dollars.

Statement covers period from 01/18/2004 CALIFORNIA 460 FORM through 02/14/2004 Page 4 of 15

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Friends Of Lou Correa

1.D. NUMBER 1243923

<del></del>	1	,			1243	923
DATE RECEIVED	FULL NAME, STREET ADDRESS AND 2IP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER ID. NUMBER)	CONTRIBUTOR CODE #	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
01/28/2004	Lawrence Agran	COM   COM   OTH   PTY   SCC	Mayor City Of Irvine	200.00	200.00	\$200 P200
01/28/2004	Patricia Callahan	IND COM	Fundraiser  American Diabetes Foundation	150.00	150.00	\$250 P200
02/04/2004	Elections Committee Of The County Of Orange -	NO N		250.00	250.00	\$350 P200
01/28/2004	Griffin Realty Corp	IND COM SOTH PTY SCC		1,000.00	1,000.00	\$1000 P2004
02/04/2004	Albert Milo	IND COM OTH PTY	Librarian City Of Fullerton	100.00	100.00	\$100 P2004
			SUBTOTAL \$	1,700.00	類是透過的解析	

## Schedule A Summary

\*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

## Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period
from 01/18/2004

CALIFORNIA 460
FORM 15

William of the second				through 02/14/	2004	Page 5	of 15	
Friends Of	Lou Correa					пр. <b>NUMB</b> 124392		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER L.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO I CALENDAR YEA (JAN. 1 - DEC. 3	AR	PER ELECTION TO DATE (IF REQUIRED)	
02/04/2004	William O'Connell	CSIND   COM   OTH   PTY   SCC	Director  Colette's Children Home	500.00	. 500	.00	\$500 P2004	
01/28/2004	Willenborg Productions	□IND □COM □XOTH □PTY □SCC		500.00	500	.00	\$500 P2004	
		IND   COM   OTH   PTY   SCC						
		COM COM OTH PTY SCC			·			
		DIND COM OTH PTY SCC	·					
			SUBTOTAL	1,000.00		TAG		

\*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH = Other

PTY - Political Party

SCC - Small Contributor Committee

FPPC Form 460 (June/01) FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule C			Type or print in ink. Amounts may be rounded						SCHEDULI
Nonmo	onetary Contributions Received		to whole dollars.		fron	Statement covers p m01/18/200	•		ORNIA 460
SEE INSTRUC	CTIONS ON REVERSE ER				thro	ough 02/14/200	14	Page_6	
Friends	Of Lou Correa					·		1.D. NUMB	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	R IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF		AMOUNT/ FAIR MARKET VALUE	CALENDA		PER ELECTION TO DATE (IF REQUIRED)
01/23/2004	International Union Of Operating	IND COM OTH PTY Scc		remittance envelope		450.00		400.00	\$1400 P200
		COM COM OTH PTY SCC							
		□ND □COM □OTH □PTY 区SCC							
		COM COM OTH PTY SSC				-			
Attach ad	iditional information on appropriately labe	eled continuati	ion sheets.	SUBTOT	TAL \$	450.00			
	le C Summary		·					tributor Code	
1. Amount of (Include)	received this period – nonmonetary contributed all Schedule C subtotals.)	tions of \$100 o	r more.		\$	450.00	IND-	- Individual I Recipient	t Committee
	received this period – unitemized nonmonet						— 0 отн	(other that ~ Other	an PTY or SCC)
<ol><li>Total non</li></ol>	nmonetary contributions received this period.	i				450.00	I scc.	– Political Pa – Small Con	arty ntributor Committee

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

450.00

Schedule E Payments Made  SEE INSTRUCTIONS ON REVERSE NAME OF FILER	Type or print in ink. Amounts may be rounded to whole dollars.				Statement cover from01/18/2 through <u>02/14/2</u>	2004 P	CALIFORNIA 460 FORM  Page 7 of 15		
Friends Of Lou Correa							ļ	243923	
CODES: If one of the following codes accurately describes CMP campaign paraphemalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations Fit. candidate filing/ballot fees FND fundraising events independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR memt MTG meeti OFC office PET petitic PHO phone POL pollin POS posta	ber commings and a expense on circulate banks ag and surage, deliversional se	nunications appearant as ting rvey resa- ery and m	ses	F F S T S T N	RAD radio airtime a returned control campaign wor tw. or cable air candidate travit RS staff/spouse taff/spouse voter registrations.	nd production cost ibutions kers' salaries rtime and production el, lodging, and me avel, lodging, and elen committees of	on costs als meals the same	candidate/sponsor Bil)
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD NUMBER)			CODE	OR .	DESCRI	TION OF PAYMENT			AMOUNT PAID
PacifiCare Of California			RFD						600.00
Washington Mutual Bank			RFD						400.00
AFSCME			RFD						1,000.00
* Payments that are contributions or independent expenditures n	nust also be :	summari	ized on S	ichedule D.			SUBTO	TAL\$	2,000.00
Schedule E Summary									
1. Payments made this period of \$100 or more. (Include all So									64,795.15
2. Uniternized payments made this period of under \$100									
3. Total interest paid this period on loans. (Enter amount from									0.00
4. Total payments made this period. (Add Lines 1, 2, and 3, E	nter here and	d on the	Summa	ary Page, Colu	mn A, Lin	e 6.)	TOTAL	\$	64,853.25

(Continuation Sheet)  Payments Made  SEE INSTRUCTIONS ON REVERSE NAME OF FILER  Amounts m to whole	print in ink ay be rounded le dollars.	be rounded Statement covers period		CALIFORNIA 460 FORM  Page 8 of 15	
CNS campaign consultants  CTB contribution (explain nonmonetary)*  CVC civic donations  FL candidate filing/ballot fees FND fundraising events  IND independent expenditure supporting/opposing others (explain)*  LEG legal defense  LIT campaign literature and mailings  MTG meetings  FET petition of phone by politing a postage, professing print ads	communications s and appearance spenses circulating anks and survey reseat delivery and me onal services (lecommunications)	es rch ssenger services	RAD radio airtime and product returned contributions SAL campaign workers' satari TEL tv. or cable airtime and p radidate travel, lodging, staff/spouse travel, lodging transfer between commit voler registration information technology co	ion costs es roduction costs and meals ig, and meals lees of the san	s ne candidate/sponso
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD NUMBER)	CODE	OR DE	SCRIPTION OF PAYMENT		AMOUNT PAID
Coca-Cola Enterprises Bottling Co	RFD				600.00
San Manuel Tribal Administration	RFD				1,000.00
Zaharoni Industries Inc	RFD				600.00
US Postmaster	POS				6,000.00
US Postmaster	POS				2,700.00
* Payments that are contributions or independent expenditures must also be summarized	on Schedule D.		•	URTOTAL S	10,000,00

10,900.00

SUBTOTAL \$

Schedule E (Continuation Sheet) Payments Made  SEE INSTRUCTIONS ON REVERSE NAME OF FILER Friends Of Lou Correa	Type or pri Amounts may to whole o	be rounded		Statement covers per 01/18/2004 from 02/14/2004	CALIFO FOR	9 of 15
CODES: If one of the following codes accurately describ  CMP campaign paraphernalia/misc.  CNS campaign consultants  CTB contribution (explain nonmonetary)*  CVC civic donations  FIL candidate filing/ballot fees  FND fundraising events  IND independent expenditure supporting/opposing others (explain)*  LEG legal defense  LIT campaign literature and mailings	MBR member co MTG meetings a OFC office expe PET petition circ PHO phone banl POL polling and POS postage, di	mmunications nd appearance enses culating cs I survey resea elivery and me	<b>9.</b> S	RAD radio airtime and pr RFD returned contribution SAL campaign workers' TBL t.v. or cable airtime TRC candidate travel, loc TRS staff/spouse travel,	ayment. roduction costs ons salaries and production costs dging, and meals lodging, and meals ommittees of the san	ne candidate/sponsor
NAME AND ADDRESS OF PAYEE [IF COMMITTEE, ALSO ENTER I.D. NUMBER]		CODE	OR ·	DESCRIPTION OF PAYMENT		AMOUNT PAID
US Postmaster		POS				1,258.00
US Postmaster		POS				5,000.00
Eduardo Velasquez		CNS				1,808.70
Norwalk Printing & Graphics Co.		LIT				2,174.74
Durkee & Associates		PRO				750.00
* Payments that are contributions or independent expenditures must als	so be summarized on	Schedule D.			SUBTOTAL \$	10,991.44

Schedule E (Continuation Sheet) Payments Made  SEE INSTRUCTIONS ON REVERSE NAME OF FILER Friends Of Lou Correa	Type or prii Amounts may! to whole d	be rounded		from_	01/18/2004 gh_02/14/2004	CALIFO FOR Page I.D. NUME	CALIFORNIA 460 FORM 460  Page 10 of 15  I.D. NUMBER 1243923	
CODES: If one of the following codes accurately descril CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member cor MTG meetings ar OFC office exper PET petition circl PHO phone bank POL polling and POS postage, de	mmunications and appearance asses ulating s survey resea elivery and me	<b>3</b> 8	RAD RFD SAL TEL, TRC TRS TSF VOT	describe the payr radio airtime and prod returned contributions campaign workers' sa t.v. or cable airtime an candidate travel, lodgi staff/spouse travel, lot transfer between com voter registration information technologi	uction costs laries Id production costs Id and meals Id ing, and meals Inities of the sar	ne candidate/sponsor	
NAME AND ADDRESS OF PAYEE (I.F. COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPTION	OF PAYMENT		AMOUNT PAID	
Durkee & Associates	·	PRO					2,430.55	
State Of California		OFC					250.00	
Political Data Inc		POL					439.49	
Southern California Edison		OFC					200.00	
Southern California Edison		OFC					120.00	
*Payments that are contributions or independent expenditures must a	lso be summarized on	Schedule D.				SUBTOTAL \$	3,440.04	

Schedule E (Continuation Sheet) Payments Made  SEE INSTRUCTIONS ON REVERSE NAME OF FILER Friends Of Lou Correa	Type or print in ink.  Amounts may be rounded to whole dollars.  Statement covers period from 01/18/2004 through 02/14/2004				CALIFO FOR Page I.D. NUME	11 of 15		
CODES: if one of the following codes accurately describes  CMP campaign paraphernalia/misc.  CNS campaign consultants  CTB contribution (explain nonmonetary)*  CVC civic donations  FL candidate filing/ballot fees  FND fundraising events  ND independent expenditure supporting/opposing others (explain)*  LEG legal defense  LIT campaign literature and mailings	MBR member com MTG meetings and OFC office expen PHO phone banks POL polling and s POS postage, deli	munication d appearan ses lating survey rese very and n	s nces earch	rices	RAD re RFD re SAL co TEL UN TRC co TRS st TSF tr VOT we	adio airtime and pro- eturned contribution ampaign workers' v. or cable airtime and date travel, lod aff/spouse travel, ansfer between co oter registration	oduction costs ns salaries and production cost iging, and meals lodging, and meals	s ne candidate/sponsor
NAME AND ADDRESS OF PAYEE (NF COMMITTEE, ALSO ENTERD. NUMBER)		CODE	OR	DESC	RIPTION	OF PAYMENT		AMOUNT PAID
Colby Poster Printing Co		LIT				·		4,698.05
Citizens For Representative Government #595003			•					
	ID: 595003	LIT						1,752.00
Tim Davis	151 005000							
		LIT						517.20
Tim Davis								
		LIT						1,486.95
Tim Davis					<del></del>			
		CNS						2,004.15
*Payments that are contributions or independent expenditures must also be	be summarized on S	chedule D	).				SUBTOTAL	10,458.35

Schedule E (Continuation Sheet) Payments Made  SEE INSTRUCTIONS ON REVERSE NAME OF FILER Friends Of Lou Correa	Type or print in ink. Amounts may be rounded to whole dollars.			Statement covers per 01/18/2004 from 02/14/2004	Page	CALIFORNIA 460 FORM 15 Page 12 of 15 I.D. NUMBER 1243923	
CODES: If one of the following codes accurately described.  CMP campaign paraphernalia/misc.  CNS campaign consultants  CTB contribution (explain nonmonetary)*  CVC civic donations  FIL candidate fiting/ballot fees  FND fundraising events  IND independent expenditure supporting/opposing others (explain)*  LEG tegal defense  LIT campaign literature and mailings	MBR member cor MTG meetings ar OFC office experience petition circle PHO phone bank POL polling and POS postage, do	nmunications ad appearance: ases dating s survey researe livery and mes		RAD radio airtime and pr RFD returned contribution SAL cempaign workers' TEL t.v. or cable airtime TRC candidate travel, loc TRS staff/spouse travel,	ayment. roduction costs ons salaries and production costs dging, and meals lodging, and meals ommittees of the san	s ne candidate/sponsor	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE C	R DE	SCRIPTION OF PAYMENT		AMOUNT PAID	
SBC Payment Center		OFC				411.74	
Orange County Register		FIL				830.16	
John Scribner		OFC				2,276.18	
The Calvert Co		OFC				Memo: 2,276.18	
John Scribner		СМР				2,812.88	
* Payments that are contributions or independent expenditures must a	ilso be summarized on	Schedule D.			SUBTOTAL S	6,330.96	

Schedule E (Continuation Sheet) Payments Made  SEE INSTRUCTIONS ON REVERSE NAME OF FILER Friends Of Lou Correa	Type or print in ink. Amounts may be rounded to whole dollars.			Statement covers period 01/18/2004 from 02/14/2004	CALIFO FOR: Page 1	SCHEDULE E (CONTROL CALIFORNIA FORM 460  Page 13 of 15  I.D. NUMBER 1243923	
CODES: If one of the following codes accurately describes  CMP campaign paraphernalia/misc.  CNS campaign consultants  CTB contribution (explain nonmonetary)*  civic donations  FIL candidate filing/ballot fees  FND fundraising events  independent expenditure supporting/opposing others (explain)*  LEG legal defense  LIT campaign literature and mailings	MBR member con MTG meetings an OFC office exper petition circu phone banks POL polling and e POS postage, de	nmunications d appearance tses llating s survey resea livery and me	es	Otherwise, describe the paym RAD radio airtime and produ returned contributions SAL campaign workers' sala tv. or cable airtime and TRC candidate travel, lodgin TRS staff/spouse travel, lodg TSF transfer between comm VOT voter registration information technology	ction costs gries production costs g, and meals ging, and meals nittees of the sami		
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPTION OF PAYMENT		AMOUNT PAID	
The Calvert Co		СМР				Memo: 2,812.88	
Little Saigon Television		TEL				1,200.00	
Beard Publishing		LIT				113.04	
California Bank & Trust		OFC				944.04	
Rusell Collins Stiger		OFC				205.30	
* Payments that are contributions or independent expenditures must also be	be summarized on	Schedule D.			SUBTOTAL \$	2 462 38	

2,462.38

SUBTOTAL \$

SCHEDULE E (CONT.) Schedule E Type or print in ink. Statement covers period (Continuation Sheet) Amounts may be rounded CALIFORNIA to whole dollars. 01/18/2004 **FORM Payments Made** through 02/14/2004 Page 14 of 15 SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. NUMBER Friends Of Lou Correa 1243923 CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. RAD radio airtime and production costs CMP campaign paraphemalia/misc. MBR member communications ans campaign consultants MTG meetings and appearances RFD returned contributions contribution (explain nonmonetary)\* OFC office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs candidate filing/ballot fees phone banks candidate travel, lodging, and meals FND fundraising events polling and survey research staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain)\* postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor LEG legal defense professional services (legal, accounting) voter registration VOT campaign literature and mailings WEB information technology costs (internet, e-mail) print ags NAME AND ADDRESS OF PAYEE CODE OR DESCRIPTION OF PAYMENT AMOUNT PAID (IF COMMITTEE, ALSO ENTER I.D. NUMBER) Nguoi Viet News PRT 2.067.00 Recomp **OFC** 485.00 Web Trend LIT 2,407.35 Web Trend LIT 2,351.58

LIT

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

Pacific Print Resources

SUBTOTAL \$

15,904.48

8,593.55

(Continuation Sheet)  Payments Made  Amounts town	Type or print in ink. Amounts may be rounded to whole dollars.		Statement covers period 01/18/2004 from 02/14/2004			CALIFORNIA 460	
SEE INSTRUCTIONS ON REVERSE NAME OF FILER Friends Of Lou Correa			Illiroc	igh ver nec		Page	ER
CNS campaign consultants MTG meetin CTB contribution (explain nonmonetary)* OFC office of contribution (explain nonmonetary)* CVC civic donations PET petition FIL candidate filing/ballot fees PhO phone fundraising events POL polling independent expenditure supporting/opposing others (explain)*  IND independent expenditure supporting/opposing others (explain)*	er communications ugs and appearance expenses or circulating banks and survey resea; ue, delivery and me sional services (leg	es rch ssender services	RAD RFD SAL TEL	radio airtime an returned contrit campaign work t.v. or cable airt candidate trave staff/spouse tra transfer between	payment.  Id production co- putions ers' salaries ime and product I, lodging, and m vel, todging, and en committees o	sts tion costs neals d meals if the san	s ne candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO EXTER LD. NUMBER)	CODE	OR	DESCRIPTIO	N OF PAYMENT			AMOUNT PAID
Travel Fest Inc	WEB						1,000.00
Viet Bao	PRT						1,307.50
						-	

\* Payments that are contributions or independent expanditures must also be summarized on Schedule D.

2,307.50

SUBTOTAL \$